PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/577005

CLAIMS AS FILED - PART I							SMALL EN	ITITY		OTHER	TUAN
			(Column 1)		(Column 2)		TYPE		OR		
U.S. NATIONAL STAGE FEES							RATE	FEE	7	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 1	50 LAR	IGE ENT. = \$ 300	7	BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		other situations = \$ 100 / \$ 200	1	EXAM. FEE	1		EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$50/\$100 ALL other countries = \$200/\$400		other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =	1	X \$ 125 =		1	X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			20 minus 2	20 = .	•	1	X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			// minus	3 = .	1		X \$ 100 =		OR	X \$ 200 =	200
MU	LTIPLE DEPEN	IDENT CLAIM PR	ESENT			1	+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1700
له ۲۰	1-24-06 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL I	ENTITY	OR	OTHER SMALL E	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT	PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 30	Minus **	20	=		X \$ 25 =		ØR	X \$ 50 =	
	Independent	. 4	Minus	4	= /		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180 =		OR	+ \$ 360 =	
							TOTAL ADDIT. FEE		ÓR	TOTAL ADDIT.	
			,	<u>-</u>		. ,					
		CLAIMS REMAINING AFTER AMENDMENT	N PRI	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus **			ſ	X \$ 25 =		OR	X \$ 50 =	
	Independent	•	Minus		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					Ī	+ \$ 180 =		OR	+ \$ 360 =	
							TOTAL ADDIT. FEE		OR	FEE	
	,		•								
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".											
			I For IN THIS SPACE is For (Total or Independe			in the	appropriate box	in column 1.			